

Granite State
Health Care Coalition

Annual Report

2022-2023



Foundation *for*
Healthy Communities



Foundation *for* Healthy Communities

The Granite State Health Care Coalition is an initiative of the Foundation for Healthy Communities, a non-profit organization that engages in innovative partnerships to improve health and health care in New Hampshire by addressing quality of care, access to care, and community prevention.

The preparation of this report was financed under a Contract with the State of New Hampshire, Department of Health and Human Services, with funds provided in part by the State of New Hampshire and/or such other funding sources as were available or required, e.g., the United States Department of Health and Human Services.

Granite State Health Care Coalition


✉ gshcc@healthynh.org 
healthynh.org



TABLE OF CONTENTS

ASPR Healthcare Preparedness and Response Capabilities _____ 4

Membership Overview _____ 5

Performance Measures _____ 6

Planning Overview _____ 7

Exercise Overview _____ 8

Ongoing Response Efforts and Activities _____ 10

CDC Infection Prevention and Control Grant Project _____ 11

ASPR HEALTH CARE PREPAREDNESS & RESPONSE CAPABILITIES

The United States Department of Health and Human Services (HHS) Administration for Strategic Preparedness and Response (ASPR) leads the country in preparing for, responding to, and recovering from the adverse health effects of emergencies and disasters. Each jurisdiction provides key support to the health care delivery system. The 2017-2022 Health Care Preparedness and Response Capabilities outline the high-level objectives that the nation's health care delivery system, including health care coalitions, should undertake to prepare for, respond to, and recover from emergencies. These capabilities illustrate the range of preparedness and response activities that, if conducted, represent the ideal state of readiness in the United States.

The four Health Care Preparedness and Response Capabilities are:

- Capability 1: Foundation for Health Care and Medical Readiness
- Capability 2: Health Care and Medical Response Coordination
- Capability 3: Continuity of Health Care Service Delivery
- Capability 4: Medical Surge

Each year, the Granite State Health Care Coalition (GSHCC) identifies and implements activities to support the development or sustainment of each capability. In 2022- 2023, the GSHCC updated the annual Hazard Vulnerability Analysis (HVA), developed the *NH GSHCC Radiation Emergency Surge Annex*, updated the *GSHCC Continuity of Operations (COOP) Plan*, *NH GSHCC Pediatric Surge Annex*, *NH GSHCC Burn Surge Annex*, *NH GHSCC Infectious Disease Surge Annex*, *GSHCC Preparedness Plan*, and *GSHCC Coordination Plan*. The GSHCC also updated the Alternate Care System (ACS) gap analysis, conducted the functional Medical Response and Surge Exercise (MRSE), and MRSE AAR/IP, participated in the State Crisis Standards of Care (CSC) tabletop exercise- Wicked Catastrophe, conducted the Phase 3 COVID-19 AAR, completed two redundant communications drills, completed two GSHCC Connect Newsletter editions, and downloaded HHS emPOWER twice. The GSHCC also held the General Membership Meeting and 2023 GSHCC Conference, supported information sharing and communications, provided training and technical assistance to members, and maintained ongoing support to members to address issues of medical surge, continuity of health care service delivery, and health care and medical response coordination through the COVID-19 pandemic response.

The GSHCC has assisted hospital partners with required federal and state reporting, trained partners on Juvare EMResource and eICS, assisted partners with critical resource needs, disseminated relevant weekly webinar and training information, and assisted LTC with infection and control capabilities through the CDC Infection Prevention and Control Grant Project. The GSHCC has supported partners through additional real-world events including utility failures, cold weather events, resource shortages, staffing shortages, surge events, and cyber threats. The GSHCC also led the Alternate Care System (ACS) and Medical Operations Coordination Cell (MOCC) workgroups. These activities have advanced the ability, capacity, and capabilities of the health care delivery system to prepare for, respond to, and recover from emergencies.

MEMBERSHIP OVERVIEW

All partners are valued Granite State Health Care Coalition general members. Part of the mission of the GSHCC is to garner formal support, encourage collaborative approaches to information and resource sharing, and support continuity of health care service delivery. To establish a membership structure, the GSHCC encourages general members to become supporting members of the Coalition with a signed Letter of Support.

Supporting members are eligible for additional benefits beyond what is extended to general members, including more specific technical assistance, exercise evaluation assistance, and more intensive educational opportunities.

GSHCC LEADERSHIP TEAM

The Granite State Health Care Coalition maintains a Leadership Team which provides guidance and subject matter expertise in decisions regarding Health Care Coalition priorities and objectives.

The Leadership Team representatives serve as active members of the coalition. The team represents all core membership sectors including hospitals, public health, EMS, and emergency management. Additional members of the Leadership Team include representatives from long term care, Federally Qualified Health Centers and Community Health Centers, home health care, and specialty providers.

FOCUS AREAS

Each year, the Administration for Strategic Preparedness and Response (ASPR) outlines hazard-specific planning, training, and exercise goals. The GSHCC Leadership Team and partners engage in activities to enhance capabilities as directed by ASPR and enhance preparedness around top ranked hazards in the HVA. In 2023, the GSHCC focused on radiation emergency surge planning, exercising crisis standards of care planning assumptions, ACS planning, MOCC planning, and the ongoing response to the COVID-19 pandemic and its cascading impacts.

PERFORMANCE MEASURES

The Administration for Strategic Preparedness and Response (ASPR) uses standardized performance measures to measure the programmatic effectiveness and impact of funding to Hospital Preparedness Program (HPP) cooperative agreement recipients and health care coalitions. Performance measures define commonly understood goals and objectives. The 2019-2023 ASPR HPP performance measures for the GSHCC are included for member reference.

HPP Performance Measures (2019-2023)

1	Percent of funding each HCC receives from the recipient, other federal resources and non-federal sources.	100%
4	Membership representation rate of HCC core (acute care hospitals, EMS, emergency management agencies, and public health agencies) and additional member organizations by member type.	Hospitals 100% Emergency Management 100% Emergency Medical Services 100% Public Health 100%
5	Percent of HCCs that have complete and approved response plan.	NH GSHCC Response (Coordination) Plan was updated and approved
6	Percent of HCCs that have a complete and approved response plan annex addressing the required annual specialty surge requirement. [BP4- Radiation Surge] . All specialty annexes have been updated.	NH GSHCC Radiation Emergency Surge Annex was drafted, validated, updated and approved; The NH GSHCC Coordination Plan, Pediatric Surge Annex, Infectious Disease Surge Annex, and Burn Surge Annex were updated.
7B	Percent of HCCs that access the de-identified emPOWER data map at least once every six months to identify the number of individuals with electricity-dependent medical and assistive equipment for planning purposes.	emPOWER data downloaded twice in 2022-2023 and included in Preparedness Plan
10	Percent of HCCs where areas for improvement have been identified from HCC and member organizations' own exercises or real-world events, and the HCCs' response plans have been revised to reflect improvements.	GSHCC COVID-19 AAR/IP #3 was conducted.
12	Percent of HCCs that have drilled their primary communications plan and system/platform and one redundant communications system/platform at least once every six months.	Redundant communications drills completed in October 2022 and April 2023
13	HCC member organizations that responded during a redundant communications drill	Drill 1 Drill 2 70% 65%
14-21	MRSE Performance Measures	GSHCC Conducted the MRSE 10.11.22

PLANNING OVERVIEW

The Granite State Health Care Coalition has successfully completed all required health care coalition planning deliverables for 2022-2023.

Radiation Emergency Surge Annex - *NEW*

The *NH GSHCC Radiation Emergency Surge Annex* has been composed to reflect the GSHCC response, as a support to ESF-8, in the event a radiation emergency surge incident impacts New Hampshire and its healthcare and public health systems. The Annex provides high level guidance and identifies experts and specialized resources that must be engaged in a radiation emergency surge response as well as additional mechanisms/processes. The Annex will be validated in a tabletop exercise in July 2023.

GSHCC Continuity of Operations (COOP) Plan- *Update*

The Granite State Health Care Coalition updated the *GSHCC Continuity of Operations (COOP) Plan* to document mission essential functions and essential supporting activities required to maintain GSHCC continuity of operations before, during, and after an emergency impacting the health care and public health sectors at the direction of ESF-8. This updated Plan reflects the roles and responsibilities of new and remaining staff.

Pediatric Surge Annex - *Update*

The *NH GSHCC Pediatric Surge Annex* was updated based on lessons learned from the summer-fall 2023 RSV surge in children and regional planning assumptions which assisted in mitigating impacts from the unexpected surge. The Annex was revised to apply to a pediatric surge scenario rather than solely an MCI involving pediatric patients.

Burn Surge Annex - *Update*

The *NH GSHCC Burn Surge Annex* was updated to reflect changes in American Burn Association guidelines, new resources, and new referral guidance from Shriners Children's Boston.

Infectious Disease Surge Annex - *Update*

The *NH GSHCC Infectious Disease Surge Annex* update includes revisions based on developing regional high consequence infectious disease planning assumptions. Provisional language was added to reflect the evolving hospital response tiers for infectious disease management and special pathogen planning.

Response (Coordination) Plan - *Update*

The *GSHCC Coordination Plan* update includes additional information on NH Crisis Standards of Care (CSC) planning assumptions and how the GSHCC integrates into ESF-8 planning and response functions.

Preparedness Plan – Update

The *GSHCC Preparedness Plan* update includes integrated strategies and tactics that promote communications, information sharing, resource coordination, and operational response planning between GSHCC and Region 1 Regional Disaster Health Response System (RDHRS). In the update, the NH GSHCC Preparedness Plan also includes revised language on GSHCC committees and updated appendices.

Hazard Vulnerability Analysis (HVA) - Update

Foundational to GSHCC planning and activities, the *GSHCC Hazard Vulnerability Analysis (HVA)* was updated to reflect changes in hazard priority impacts and preparedness efforts over the past year. Mitigation strategy implementation activity gaps were identified, and solutions addressed through a survey and meeting culminating in a report.

EXERCISE OVERVIEW

Medical Response and Surge Exercise (MRSE)

In 2021-2022, the Medical Response and Surge Exercise (MRSE) was launched by ASPR to replace the Coalition Surge Test (CST). The exercise was conducted October 11th-October 12th 2022 and has been redesigned to provide health care coalitions with additional scenario flexibility and application to real-world event responses. Flexibility was provided to jurisdictions to complete this exercise in 2021-2022 (BP3) or in 2022-2023 (BP4). To be better prepared for the exercise, NH conducted the MRSE functional exercise in 2022-2023 (BP4).

Crisis Standards of Care CONOPs Tabletop Exercise

The Crisis Standards of Care (CSC) CONOPs Tabletop Exercise was held on April 19, 2023. The NH DHHS, DPHS, Bureau of Emergency Preparedness Response and Recovery (EPRR) facilitated the exercise along with FEMA National Exercise Division (NED). The exercise reviewed response functions relative to an earthquake scenario resulting in a mass fatality incident. Exercise participants included hospitals, urgent care centers, long term care facilities, skilled nursing homes, federal, state, and local emergency management, regional public health networks, the New Hampshire Air National Guard, Region 1 Regional Disaster Health Response System (RDHRS), NH DHHS, DPHS, Bureau of Infectious Disease Control (BIDC), Department of Safety, Vital Records Administration, NH Department of Transportation (DOT), and The Office of the Chief Medical Examiner.

Radiation Emergency Surge Annex Tabletop Exercise

The Radiation Emergency Surge Annex Tabletop Exercise will be held July 12, 2023 with support from core partners. GSHCC is currently developing the exercise with core members and subject matter experts to validate the information within the NH GSHCC Radiation Emergency Surge Annex. The Exercise will address pre-hospital response, patient movement, and reunification during a radiological event.

Chemical Surge Annex Tabletop Exercise

The Chemical Surge Annex is a new annex that is currently under development. The annex will address risks for community chemical events, coordination of decontamination of patients in the hospital and EMS settings, mobilization of chemical countermeasures (CHEMPACK), reception center plans with public health partners, and the involvement and coordination of regional HAZMAT resources. The Chemical Surge Annex Tabletop Exercise will be conducted in 2024. The GSHCC will partner with core members and subject matter experts to develop the exercise. The exercise will test a sudden surge of patients that require chemical countermeasures, reception center plans, HAZMAT resources, and patient movement.

EXERCISE OUTLOOK

Over the next year, the Coalition will be diving into several exercises that will require participation from core membership sectors (emergency management, EMS, public health, hospitals) and other health care partners. Please find below a rough timeline of what is on the horizon for required exercises. Additional exercises may be scheduled to meet identified needs.

Activity	Timeline	Description/ Notes	Partners
BP 4 (July 2022 – June 2023)			
Medical Response and Surge Exercise	Oct/Nov '22	Annual requirement for the MRSE functional exercise.	Core members, others TBD
Crisis Standards of Care CONOPs Tabletop Exercise	April '23	Requirement to validate <i>the Crisis Standards of Care Guidance for New Hampshire</i> CONOPs by June 2023.	Core members, others TBD
Radiation Surge Annex Tabletop Exercise	July '23	Discussion-based exercise to validate the GSHCC Radiation Surge Annex.	Core members, others TBD
BP 5 (July 2023 – June 2024)			
Medical Response and Surge Exercise	Fall '23	Annual requirement - MRSE functional exercise	Core members
Chemical Surge Annex Tabletop Exercise	Spring '24	Discussion-based exercise to validate the GSHCC Chemical Surge Annex.	Core members, others TBD

ONGOING RESPONSE EFFORTS AND ACTIVITIES

RESPONSE SUPPORT

On-going COVID-19 Response and Recovery Support

Due to the COVID-19 response and its cascading impacts, the Granite State Health Care Coalition was able to provide ongoing support to a variety of partners through special projects, workgroups, and operational support such as sourcing PPE.

Summer-Fall RSV Surge

During the summer-fall of 2022 the GSHCC supported hospital and healthcare partners through an unprecedented RSV surge in pediatric patients. The GSHCC supported ESF-8 through coordination, communication, and bed availability tracking in Juvare.

Data Reporting

Ongoing requests for data from federal and state partners continued throughout the year. Daily, data was

verified and submitted in accordance with federal and state compliance requirements through Juvare EMResource. The GSHCC team continues to administer and make adjustments to the reporting platform to support requirements and operational decision making.

RESPONSE EVALUATION

The Granite State Health Care Coalition completed a third real-world event after-action review process to add to a growing body of knowledge of the health care and public health system response to the COVID-19 pandemic. Through the COVID-19 response after-action reporting processes, many recommended actions have been identified by stakeholders as possible strategies or activities to address the root causes of identified areas for improvement. These recommendations have been aggregated and aligned to specific areas for improvement and prioritized based on anticipated impact, available resources, span of influence of the Coalition, and alignment with existing program priorities.

The GSHCC staff met with key stakeholders to propose recommended courses of action and begin work on implementing selected strategies and activities. Highest priority items were identified across preparedness domains, and work to implement identified strategies will be an ongoing effort as they are integrated into future program activities. Outlined below are just some of the activities and initiatives that the GSHCC is leading or supporting over the next several months. These activities are part of efforts to continuously improve health care preparedness and response capabilities across NH.

The GSHCC hopes to continue the evaluation process into 2023-2024 with a focus on recovery.

COVID-19 PHASE 3 AFTER-ACTION REPORT AND EXECUTIVE SUMMARY

The GSHCC completed Phase 3 of the COVID After-Action Report and Executive Summary. Phase 3 of the COVID-19 After-Action Report captures strengths and areas for improvement from June 30, 2021, through the end of the State of Emergency. This timeframe included response activities such as Booster Blitz I & II, Delta and Omicron Surges, and staffing and supply chain shortages. During this process, the GSHCC conducted outreach to partners throughout EMS, Public Health, Hospitals, Emergency Management, among others consisting of surveys and stakeholder interviews. The GSHCC collected survey responses and conducted interviews with GSHCC partners on lessons learned and key takeaways during this timeframe.

The GSHCC plans to culminate the COVID-19 AAR evaluation process with a recovery focused COVID-19 AAR in the summer-fall 2023.

WORKGROUP DEVELOPMENT

Medical Operations Coordination Center (MOCC) is concept of providing overarching medical guidance for patient load transfer and patient load balance. A small workgroup has been convened to discuss how to implement the application of a MOCC in NH. The project has many facets and will be divided into manageable pieces as the larger plan is under development. Hospital representatives including Chief Medical Officers, Chief Nursing Officers, and Hospital Emergency Managers participate in this planning team.

An Alternate Care System (ACS) workgroup continues to meet as planning assumptions, objectives, and guidelines are being developed.

Both MOCC and ACS will have shared objectives and key stakeholders as they continue to meet with the planning teams on a regular basis.

CDC INFECTION PREVENTION AND CONTROL GRANT PROJECT

The Granite State Health Care Coalition, through the *‘Nursing Home & Long-term Care Facility Strike Team and Infrastructure Project’* is working to assist long-term care and skilled nursing facilities during their response to SARS-CoV-2 infections, and also to build and maintain the infection prevention infrastructure necessary to support resident, visitor, and facility healthcare personnel safety, to include:

- GloGerm and N95 Fit Testing Train-the-Trainer workshops
- Infection Prevention and Control credentialing for facility staff including; CIC, LTC-CIP, and a-IPC
- Credentialing for Environmental Services staff for Servsafe
- Staff educational programs including Infection Control Amplification in Nursing Centers (ICAN)
- Long-Term Care and Skilled Nursing LNA workforce augmentation
- Additional Infection Prevention and Control activities.

Through this funding, the Coalition is collaborating with Healthcare-Associated Infection (HAI) Program at NH DHHS and subject matter experts to offer infection prevention and control activities. Currently, work is ongoing on various fronts throughout New Hampshire and will continue one-year after the end of the COVID-19 Public Health Emergency; May 11, 2024.



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Granite State Health Care Coalition
c/o Foundation for Healthy
Communities
125 Airport Road
Concord, NH 03301



healthynh.org



gshcc@healthynh.org



603.415.4263